

MAY 15 2018

LEGISLATIVE RESOURCE CENTER

Page 7 of 11

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U.S. HOUSE OF REPRESENTATIVES
OFFICE OF THE CHIEF CLERK

For New Members, Candidates, and New Employees

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT

FORM B

Name: Suraj Champak Patel

Daytime Telephone: _____

FILER STATUS		New Member of or Candidate for U.S. House of Representatives State: NY District: 12	Check if Amendment
		Candidate – Date of Election: _____	
		New Officer or Employee Employing Office: _____	Staff Filer Type (if Applicable): Shared <input type="checkbox"/> Principal Assistant <input checked="" type="checkbox"/>
		Period Covered: January 1, 2017 to April 15, 2018	
<p>A \$200 penalty shall be assessed against any individual who files more than 30 days late.</p> <p style="text-align: right;">(Office Use Only)</p> 			

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child:
 a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? Yes No

b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?

c. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?

d. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?

E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? Yes No

F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?

J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? Yes No

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "exempted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? Yes No

EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. Yes No

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Suraj Champak Patel

Page 3 of 8

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Suraj Champak Patel Page 3 of 8

BLOCK A Assets and/or Income Sources	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income																									
			A	B	C	D	E	F	G	H	I	J	K	L	M	Current Year	N	V	VI	VI	X	XI	XII	Preceding Year	N	V	VI	VI
None																												
\$1-\$1,000																												
\$1,001-\$15,000																												
\$15,001-\$50,000																												
\$50,001-\$100,000																												
\$100,001-\$250,000																												
\$250,001-\$500,000																												
\$500,001-\$1,000,000																												
\$1,000,001-\$5,000,000																												
\$5,000,001-\$25,000,000																												
\$25,000,001-\$50,000,000																												
Over \$50,000,000																												
Spouse/DC Asset over \$1,000,000*																												
NONE																												
DIVIDENDS																												
RENT																												
INTEREST																												
CAPITAL GAINS																												
EXCEPTED/BIND TRUST																												
TAX-DEFERRED																												
Other Type of income (Specify: e.g., Partnership Income or Farm Income)																												
None																												
\$1-\$200																												
\$201-\$1,000																												
\$1,001-\$2,500																												
\$2,501-\$5,000																												
\$5,001-\$15,000																												
\$15,001-\$50,000																												
\$50,001-\$100,000																												
\$100,001-\$1,000,000																												
\$1,000,001-\$5,000,000																												
Over \$5,000,000																												
Spouse/DC Income over \$1,000,000*																												
None																												
\$1-\$200																												
\$201-\$1,000																												
\$1,001-\$2,500																												
\$2,501-\$5,000																												
\$5,001-\$15,000																												
\$15,001-\$50,000																												
\$50,001-\$100,000																												
\$100,001-\$1,000,000																												
\$1,000,001-\$5,000,000																												
Over \$5,000,000																												
Spouse/DC Income over \$1,000,000*																												

Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Suraj Champak Patel

Page 4 of 8

Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Suraj Champak Patel

Page 5 of 8

BLOCK A Assets and/or Income Sources	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income											
			A	B	C	D	E	F	G	H	I	J	K	L
			None											
			\$1-\$1,000											
			\$1,001-\$15,000											
			\$15,001-\$50,000											
			\$50,001-\$100,000											
			\$100,001-\$250,000											
			\$250,001-\$500,000											
			\$500,001-\$1,000,000											
			\$1,000,001-\$5,000,000											
			\$5,000,001-\$25,000,000											
			\$25,000,001-\$50,000,000											
			Over \$50,000,000											
			Spouse/DC Asset over \$1,000,000*											
			NONE											
			DIVIDENDS											
			RENT											
			INTEREST											
			CAPITAL GAINS											
			EXCEPTED/BLIND TRUST											
			TAX-DEFERRED											
			Other Type of Income (Specify: e.g., Partnership income or Farm income)											
			None	1	1	1	1	1	1	1	1	1	1	1
			\$1-\$200	1	1	1	1	1	1	1	1	1	1	1
			\$201-\$1,000	1	1	1	1	1	1	1	1	1	1	1
			\$1,001-\$2,500	1	1	1	1	1	1	1	1	1	1	1
			\$2,501-\$5,000	1	1	1	1	1	1	1	1	1	1	1
			\$5,001-\$15,000	1	1	1	1	1	1	1	1	1	1	1
			\$15,001-\$50,000	1	1	1	1	1	1	1	1	1	1	1
			\$50,001-\$100,000	1	1	1	1	1	1	1	1	1	1	1
			\$100,001-\$250,000	1	1	1	1	1	1	1	1	1	1	1
			\$250,001-\$500,000	1	1	1	1	1	1	1	1	1	1	1
			\$500,001-\$1,000,000	1	1	1	1	1	1	1	1	1	1	1
			Spouse/DC Income over \$1,000,000*	1	1	1	1	1	1	1	1	1	1	1
			NONE	1	1	1	1	1	1	1	1	1	1	1
			\$1-\$200	1	1	1	1	1	1	1	1	1	1	1
			\$201-\$1,000	1	1	1	1	1	1	1	1	1	1	1
			\$1,001-\$2,500	1	1	1	1	1	1	1	1	1	1	1
			\$2,501-\$5,000	1	1	1	1	1	1	1	1	1	1	1
			\$5,001-\$15,000	1	1	1	1	1	1	1	1	1	1	1
			\$15,001-\$50,000	1	1	1	1	1	1	1	1	1	1	1
			\$50,001-\$100,000	1	1	1	1	1	1	1	1	1	1	1
			\$100,001-\$250,000	1	1	1	1	1	1	1	1	1	1	1
			\$250,001-\$500,000	1	1	1	1	1	1	1	1	1	1	1
			\$500,001-\$1,000,000	1	1	1	1	1	1	1	1	1	1	1
			Spouse/DC Income over \$1,000,000*	1	1	1	1	1	1	1	1	1	1	1

Use additional sheets if more space is required.

SCHEDULE C – EARNED INCOME

Name: Suraj Champak Patel Page 6 of 8

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

EXCLUDE: Military pay (such as National Guard or Reserve pay), Federal retirement programs, and benefits received in income exceeding \$10,000. See definitions under the Social Security Act.

Members and employees compensated at or above the "Senior staff rate" was \$21,495. The 2017 limit is \$27,785. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Use additional sheets if more space is required.

SCHEDULE D – LIABILITIES

Name: Suraj Champa Patel Page 7 of 8

Report **Liabilities** of over \$10,000 owed to any one creditor at **any time** during the reporting period. **New Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. **Report a revolving charge account** (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000.

*Column K is for liabilities held solely by your spouse or dependent child.

Report liabilities of over \$1,000 owed to any one creditor at any time during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owned to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000.										
*Column K is for liabilities held solely by your spouse or dependent child.										
Creditor	Type of Liability	Date Liability Incurred MO/YR	Amount of Liability							
			A	B	C	D	E	F	G	H
First Bank of Wilmington, DE	Mortgage on Rental Property, Down, DE	8/08	\$10,001- \$15,000							
Huntington National Bank	Personal Line Credit, Indianapolis, IN	9/2016	\$15,001- \$50,000							
Gold Coast Bank	Rental Mortgage, East Hampton, NY	3/2017	\$50,001- \$100,000	X						
			\$100,001- \$250,000							
			\$250,001- \$500,000							
			\$500,001- \$1,000,000							
			\$1,000,001- \$5,000,000							
			\$5,000,001- \$25,000,000							
			\$25,000,001- \$50,000,000							
			Over \$50,000,000							
			Over \$1,000,000* (Spouse/DC Liability)							

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Sun Development & Management Co	President
Atlas DIY	Board of Directors

Use additional sheets if more space is required.

SCHEDULE F – AGREEMENTS

Name: Suraj Champak Patel Page 6 of 8

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

SCHEDULE J – COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

Use additional sheets if more space is required.